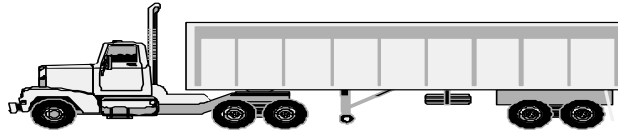


**COMMON CARRIER OF PROPERTY
EXCLUDING HOUSEHOLD GOODS**

1300 South Evergreen Park Drive SW
PO Box 47250
Olympia, WA 98504-7250
Phone (360) 664-1222
Fax (360) 586-1181
Web Site: www.wuttc.wa.gov



This application packet includes:

PART A – Application for Permit

PART B – Safety Fitness Survey

- Must be completed by all applicants that operate a vehicle with a Gross Vehicle Weight Rating (GVWR) of over 10,000 pounds.

PART C – Section 1, Safety Fitness Survey

Section 2, Hazardous Materials Questionnaire

- Both Section 1 and 2 must be completed by all applicants that intend to transport hazardous materials.

ADDITIONAL INFORMATION

- WAC 480-14 Rules Relating to Motor Carriers, Excluding Household Goods Carriers and Common Carrier Brokers
- Your Guide to Achieving a Satisfactory Safety Record

Intrastate Common Carriers hauling general commodities (excluding household goods) must apply for and receive a permit from the commission prior to conducting hauling for-hire in the state of Washington. Household Goods and Brokers require a different application.

PLEASE READ INSTRUCTIONS CAREFULLY

**INCOMPLETE OR INCORRECT APPLICATIONS MAY DELAY ISSUANCE OF YOUR PERMIT.
APPLICATIONS MUST BE ACCOMPANIED BY THE APPROPRIATE APPLICATION FEE.**

WASHINGTON UTILITIES AND TRANSPORTATION COMMISSION

Licensing Services
PO Box 47250, Olympia, WA 98504-7250
Phone: (360) 664-1222 Fax (360) 586-1181

INSTRUCTIONS

General Commodities - Excluding Household Goods & Brokers

PART A - APPLICATION FOR PERMIT

TYPE OF APPLICATION: Check the type of application and operating authority requested. General Commodities, Hazardous Materials, and Armored Car Service are defined in WAC 480-14-040.

- **New Common Carrier Permit Authority or Transfer of Existing Permit Number** applies if you are making application for a new permit, applying to reactivate a permit which has been canceled for more than ten (10) months, or applying to transfer an existing permit.
- **Extension of Existing Common Carrier Permit Authority** applies if you currently have an active permit authority with the Commission and you want to add additional authority.
- **Reinstatement of Canceled Common Carrier Permit Authority** applies if you want to reactivate a permit within ten (10) months of cancellation. You must apply for a NEW permit if your permit has been canceled for more than ten (10) months.

MOTOR CARRIER IDENTIFICATION: List your current Common Carrier permit number (required for a transfer, extension, or reinstatement application), USDOT number, and Unified Business Identifier (UBI). Companies hauling for-hire within Washington must have a UBI number from the Department of Licensing.

- **Requirement for a USDOT number - Intrastate:** Any applicant that will operate a vehicle with a GVWR of 26,001 pounds or more, or any applicant that plans to haul hazardous materials requiring a placard, must obtain a USDOT number, as required by the Washington State Patrol (WSP). You may apply for a USDOT number online at www.fmcsa.dot.gov/online-registration. You may contact WSP at (360) 596-3816 for assistance. Beginning January 1, 2011, any applicant that will operate a vehicle with a GVWR of 16,001 pounds or more must obtain a USDOT number.
- **Requirement for a USDOT number - Interstate:** Any applicant that will operate a vehicle with a GVWR of 10,001 pounds or more, or any applicant that plans to haul hazardous materials requiring a placard, must obtain a USDOT number.

The applicant name must be either an individual, partnership, or corporation and must agree exactly with the name on the insurance certificate. If a corporation, the name must also match the corporate name as registered with the Secretary of State's office. Under "D/B/A" you may list a trade or business name as registered with the Department of Licensing, if different than the applicant name. List a PHYSICAL address (location) of the business records, if it is different from the mailing address.

TYPE OF MOTOR CARRIER: Check the type of business. If other than INDIVIDUAL, list the names and addresses of all partners or shareholders and their percentage of interest.

TRANSFER OF PERMIT NUMBER: If you are transferring a permit number from one owner to another, you must complete this section. You will be assigned a new permit number if the current permit holder does not authorize transfer of the permit number to you.

INSURANCE REQUIREMENTS: Each applicant must check the appropriate box to indicate whether they are, or are not, planning to haul hazardous materials. Applicants must file proof of liability and property damage insurance covering each vehicle used under the permit. Proof of insurance must be submitted by the applicant's insurance company on either a uniform motor carrier bodily injury property damage liability

certificate of insurance (FORM E), or a written binder. If a binder is submitted, it may be effective for not longer than 60 days, during which time the carrier's insurance company must file the required FORM E. **THE NAME ON THE INSURANCE MUST MATCH THE APPLICANT NAME EXACTLY.**

Required insurance limits for vehicles with GVWR of less than ten thousand pounds:

\$300,000 General Commodities Only

\$5,000,000 Any quantity of Division 1.1, 1.2, or 1.3 material; any quantity of a Division 2.3, Hazard Zone A, or Division 6.1, Packing Group I, Hazard Zone A material; or highway route controlled quantities of a Class 7 material, as defined in 49 CFR 173.403.

Required insurance limits for vehicles with GVWR of ten thousand pounds or more:

\$750,000 General Commodities and/or Armored Car Service.

\$1,000,000 Oil listed in 49 CFR 172.101; hazardous waste, hazardous materials and hazardous substances defined in 49 CFR 171.8 and listed in 49 CFR 172.101, but not mentioned in the description of the \$5,000,000 coverage requirements, below.

\$5,000,000 Hazardous substances, as defined in 49 Code of Federal Regulations (CFR) 171.8 transported in cargo tanks, portable tanks, or hopper-type vehicles with capacities in excess of 3,500 water gallons; or in bulk Division 1.1, 1.2 and 1.3 materials, Division 2.3, Hazard Zone A, or Division 6.1, Packing Group I, Hazard Zone A material, in bulk Division 2.1 or 2.2; or highway route controlled quantities of a Class 7 material, as defined in 49 CFR 173.403 **OR** any quantity of Division 1.1, 1.2, or 1.3 material; any quantity of a Division 2.3, Hazard Zone A, or Division 6.1, Packing Group I, Hazard Zone A material; or highway route controlled quantities of a Class 7 material, as defined in 49 CFR 173.403.

MOTOR VEHICLE LIST: List all motorized vehicles, including any truck or truck tractor, that will be used to haul under this permit.

PART B - SAFETY FITNESS SURVEY

SAFETY FITNESS SURVEY: All applicants with a vehicle over 10,000 gross vehicle weight rating (GVWR) must complete the Safety Fitness Survey. All permitted motor carriers must comply with all of the applicable state and federal safety requirements for their operations.

PART C – HAZARDOUS MATERIALS

Applicants who will be hauling hazardous materials that require a placard must complete Part C, Sections 1 and 2.

CONTACTS FOR ADDITIONAL ASSISTANCE

| | | |
|---|---------------------------------------|----------------|
| FMCSA (Interstate) authority, DOT numbers, Hazardous materials placards | US DOT, FMCSA, Olympia, WA Office | (360) 753-9875 |
| Interstate/Intrastate hazardous materials regulations | US Pipeline/Hazardous Materials Admin | (202) 366-4433 |
| Vehicle licenses, Titles, Registrations | WA Dept of Licensing | (360) 902-3770 |
| Commercial drivers licenses (CDL), Medical waivers | WA Dept of Licensing | (360) 902-3619 |
| Prorate, IRP, Reciprocity | WA Dept of Licensing | (360) 664-1858 |
| Master business license, Unified business identifier (UBI) | WA Dept of Licensing | (360) 664-1400 |
| IFTA, Fuel bonds, Fuel permits, Fuel tax | WA Dept of Licensing | (360) 664-1868 |
| Oversize and overweight permits, Log tolerance | WA Dept of Transportation | (360) 704-6340 |
| Commercial vehicle size and weight, Driver and equipment safety, Hazardous material regulations, Ports of entry, Scales | Washington State Patrol | (360) 596-3800 |
| Corporate registrations | WA Secretary of State | (360) 725-0377 |
| Heavy vehicle use tax report | Internal Revenue Service | 1-800-829-1040 |

PART A

TV# _____

WASHINGTON UTILITIES AND TRANSPORTATION COMMISSION

1300 S Evergreen Park Dr SW, PO Box 47250, Olympia, WA 98504-7250

Telephone (360) 664-1222 – Fax (360) 586-1181

Intrastate Common Carrier Operating Authority**APPLICATION FOR PERMIT**

(excluding Household Goods and Common Carrier Brokers)

FOR OFFICIAL USE ONLY

Reception Number:

Safety:

Carrier ID#:

111 0268 200 02

Insurance:

Employee:

TYPE OF APPLICATION (check one)**New Common Carrier Permit Authority, or
Transfer of Existing Permit Number****Extension of Common Carrier Permit Authority**☐ \$275 GENERAL COMMODITIES ONLY☐ \$100 GENERAL COMMODITIES, including
ARMORED CAR SERVICE☐ \$275 GENERAL COMMODITIES, including
ARMORED CAR SERVICE☐ \$100 GENERAL COMMODITIES, including
HAZARDOUS MATERIALS☐ \$275 GENERAL COMMODITIES, including
HAZARDOUS MATERIALS☐ \$100 GENERAL COMMODITIES, including
HAZARDOUS MATERIALS and ARMORED CAR
SERVICE☐ \$275 GENERAL COMMODITIES, INCLUDING
HAZARDOUS MATERIALS and ARMORED CAR
SERVICE☐ **\$100 REINSTATEMENT OF CANCELLED COMMON CARRIER PERMIT**
(Must be filed within 10 months of cancellation)For Commission Use Only:
Auth #: _____**TYPE OF PAYMENT**☐ Check ☐ Money Order ☐ Amex ☐ Discover ☐ Mastercard ☐ Visa

Expiration Date _____

CERTIFICATION: I, the undersigned, under penalty for false statement, certify that the following information is true and correct, that I am authorized to execute and file this document on behalf of the applicant, and that all information on file is current and valid.

Name (printed): _____ Date: _____

Signature: _____ Title: _____

MOTOR CARRIER IDENTIFICATION

CC#:

US DOT#

WA UNIFIED BUSINESS IDENTIFIER (UBI) #:

APPLICANT NAME:

PHONE#:

d/b/a:

FAX #:

BUSINESS (MAILING) ADDRESS:

(street address, P.O. Box)

(city, state, zip)

PHYSICAL ADDRESS: (street address, if different)

TYPE OF BUSINESS STRUCTURE

(check individual or complete partnership/corporation information)

☐ INDIVIDUAL ☐ PARTNERSHIP ☐ CORPORATION (LP, LLP, LLC)

STATE OF INCORPORATION _____

NAME**TITLE****ADDRESS****STOCK DISTRIBUTION OR
PERCENTAGE OF SHARE****TRANSFER OF PERMIT NUMBER**

Complete this section if you are transferring an existing permit to a new owner. List name of current permit holder and permit number to be transferred. The current permit holder must sign below to authorize the transfer of the permit number.

NAME ON PERMIT: _____ PERMIT NUMBER: _____

Signature of current permit holder_____
Date**INSURANCE REQUIREMENTS (must check one)**

A permit will not be issued until acceptable insurance is received

☐ You will not haul hazardous materials in any quantity. You will only operate vehicles with a GVWR of less than 10,000 pounds. You must obtain \$300,000 in Public Liability and Property Damage Insurance. You do not need to complete Part B.☐ You will not haul hazardous materials in any quantity. You will operate vehicles with a GVWR of 10,000 pounds or more. You must obtain \$750,000 in Public Liability and Property Damage Insurance. You must complete Part B.☐ You will haul hazardous materials requiring \$1 million in Public Liability and Property Damage Insurance. You must complete Part C, Sections 1 and 2.☐ You will haul hazardous materials requiring \$5 million in Public Liability and Property Damage Insurance. You must complete Part C, Sections 1 and 2.**MOTOR VEHICLE LIST (Attach additional pages if necessary)**

| UNIT# | LICENSE# | STATE | VIN# |
|-------|----------|-------|------|
| | | | |
| | | | |
| | | | |
| | | | |

Signature

I, as applicant, understand that the filing of this application does not in itself constitute authority to operate and that no operations may be conducted until a permit is received from the Commission. I hereby declare and affirm that the information contained in this application is true to the best of my knowledge and belief.

Signature(s)_____
Date

PART B

SAFETY FITNESS SURVEY FOR ALL APPLICANTS THAT OPERATE A VEHICLE OVER 10,000 GVWR

Companies applying to transport any commodity must complete this survey.

Instructions: In each category shown below, list the person and/or position responsible for understanding, maintaining, and complying with current Federal Motor Carrier Safety Administration (FMCSA) regulations in the Code of Federal Regulations at 49 CFR. The requirement to comply with current FMCSR is mandated by the Washington State Patrol (WSP) in its rules, Washington Administrative Code (WAC) 446-65.

Copies of the FMCSR's are available from several vendors. These include, but are not limited to:

- Washington Trucking Association, 930 S. 336th St., Suite B, Federal Way, WA 98003, www.wtatrucking.com, (800) 732-9019 or (253) 838-1650.
- J. J. Keller & Associates, Inc., 3003 W. Breezewood Lane, Neenah, WI 54957, www.jjkeller.com, (877) 564-2333.
- Willamette Traffic Bureau, 16303 NE Cameron Blvd, Portland, OR 97230-5030, www.wtbtraffic.com, (503) 236-1183.
- US Government Printing Office, 732 N. Capital Street, NW, Washington, DC 20401, www.gpo.gov, (866) 512-1800.

Controlled Substances and Alcohol Testing

Name: _____ Position: _____

Any driver who operates a vehicle that meets the definition of a commercial motor vehicle as described below must have a valid CDL. The definition of a commercial motor vehicle is a vehicle that:

- has a gross combined weight rating of 26,001 pounds that includes a towed unit with a gross vehicle weight rating of more than 10,000 pounds; or
- has a gross vehicle weight rating of 26,001 pounds or more; or
- is designed to transport 16 or more passengers, including the driver; or
- is of any size and is used to transport hazardous materials of an amount that requires placarding under hazardous materials regulations.

Any person who drives a commercial motor vehicle requiring a CDL must participate in a controlled substance and alcohol testing program as required by FMCSA in 49 CFR Part 382 and 49 CFR Part 40, and by the WSP in WAC 446-65-010.

Commercial Drivers License (CDL) Requirements

Name: _____ Position: _____

Any driver who operates a vehicle that meets the definition of a commercial motor vehicle as described below must have a valid CDL, as required by the Washington State Department of Licensing. The definition of a commercial motor vehicle is a vehicle that:

- has a gross combined weight rating of 26,001 pounds that includes a towed unit with a gross vehicle weight rating of more than 10,000 pounds; or
- has a gross vehicle weight rating of 26,001 pounds or more; or
- is designed to transport 16 or more passengers, including the driver; or
- is of any size and is used to transport hazardous materials of an amount that requires placarding under hazardous materials regulations.

Driver Qualification Requirements

Name: _____ Position: _____

Each company must maintain a complete Driver Qualification File for each employee authorized to drive motor vehicles as required by FMCSR Part 391.51 and by the WSP in WAC 446-65-010. Owner/operators that work exclusively in intrastate commerce within Washington have limited exemptions. Owners/operators that conduct any interstate operations must maintain a complete file on themselves and any other driver that they may use.

Drivers Hours of Service

Name: _____ Position: _____

Each company must maintain true and accurate hours of service records for each individual that drives a motor vehicle as required by the FMCSA in 49 CFR, Part 395.1(e) and by the WSP in WAC 446-65-010.

Vehicle Inspection, Repair, and Maintenance

Name: _____ Position: _____

Each company must prepare a written "Driver Vehicle Inspection Report" on each vehicle used each day as required by the FMCSA in 49 CFR, Part 396.11 and by the WSP in WAC 446-65-010. In addition, each company must maintain certain required records for each vehicle that includes the following, as required by the FMCSA in 49 CFR, Part 396.3 and by the WSP in WAC 446-65-010:

- Identification of the vehicle.
- The nature and due date of various inspection and maintenance operations to be performed.
- A record of inspections, repairs and maintenance indicating their date and nature.

All companies must conduct periodic inspections as required by the FMCSA in 49 CFR, Part 396.17 and by the WSP in WAC 446-65-010.

Signature

My signature below certifies that I understand my responsibility as a motor carrier and I will comply with all the safety requirements which apply to my operations.

Signature of applicant

Date

PART C – SECTION 1

SAFETY FITNESS SURVEY FOR HAZARDOUS MATERIALS APPLICANTS

Companies applying to transport hazardous materials must complete this survey.

1. Name the person or position responsible for maintaining and understanding current hazardous material regulations.

2. Are drivers provided with a current copy of Emergency Response Information as required by Title 49 CFR, Part 172.600? ☐ Yes ☐ No
3. Are drivers trained in the use of Emergency Response Information? ☐ Yes ☐ No
4. Is the Emergency Response Information carried in the vehicle? ☐ Yes ☐ No
5. Name the person or position responsible for providing training to all employees handling hazardous materials as required by Title 49 CFR, Part 177.800 and 177.816.

6. Are you familiar with accident reporting requirements in Title 49 CFR, Part 177, Subpart D? ☐ Yes ☐ No
7. Who is responsible for completing hazardous materials shipping papers?

8. Where are hazardous material shipping papers located during transportation?

9. If you transport Radioactive Materials, name person or position that will be familiar with and provide training to employees for all transportation under CFR, Part 173, Subpart I - Radioactive Materials.

10. Please attach a copy of your US Pipeline and Hazardous Materials Safety Administration (PHMSA) permit.

Signature

My signature below certifies that I understand my responsibility as a transporter of hazardous materials and I will comply with all the safety requirements which apply to my operations.

Signature of applicant

Date

PART C – SECTION 2

HAZARDOUS MATERIALS QUESTIONNAIRE

Companies applying to transport hazardous materials must complete the following questions.

1. Please indicate if you plan to transport:

- | | | |
|---|------------------------------|-----------------------------|
| • Petroleum or petroleum products in bulk in tank-type vehicles | <input type="checkbox"/> Yes | <input type="checkbox"/> No |
| • Radioactive substances | <input type="checkbox"/> Yes | <input type="checkbox"/> No |
| • Explosives | <input type="checkbox"/> Yes | <input type="checkbox"/> No |
| • Corrosives | <input type="checkbox"/> Yes | <input type="checkbox"/> No |

2. As part of transporting any of these four materials, do you or your company intend to build, or have someone else build, install or otherwise create a new structure, or a new addition to an existing structure? ☐ Yes ☐ No

- If yes, does the proposed construction require a building permit by a city, county or other governmental agency? ☐ Yes ☐ No
- If yes, which governmental agency will issue the permit? _____
- If yes, please explain what you intend to build: _____

3. In granting an application for hazardous materials transportation, the commission is required to consider possible impacts such transportation may have on the environment. Please answer the following questions related to possible environmental impacts:

- a. Do you understand you are required to comply with Washington State Patrol safety standards for hazardous materials transportation, as defined in WAC 446-65-010?
☐ Yes ☐ No
- b. Do you understand that you are required to comply with Washington State Patrol noise emission standards for commercial motor vehicles, as defined in WAC 446-65-010?
☐ Yes ☐ No
- c. Do you understand that in the case of a hazardous materials spill, you must immediately contact the local emergency services agency, such as the 911 operator?
☐ Yes ☐ No
- If your answer to a, b, or c is no, please explain: _____
